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Chapter:	Child Safety	
Subject:	Screening Reports of Child Maltreatment	Page 1 of 16
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## Purpose

To describe the role of intake and supervisory staff in the functions of educating the community, receiving referrals and making the decision to accept reports as valid allegations of child abuse or neglect as outlined in 33 VSA Chapter 49.

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## Policy

### Intake

The division has established a centralized intake unit (CIU) to provide high-quality, consistent service to individuals who wish to report suspected child abuse or neglect. After normal working hours, the Emergency Services Program (ESP) serves as the CIU.

The social worker should set a tone of concern and respect, listening actively to the person's concerns and issues. In addition, the social worker should keep in mind that educating the public about the role of the agency and the resources available to children and families in the community is important.

The division's focus on child safety requires that the social worker gather thorough information from the reporter about the alleged abuse or neglect, the family's circumstances, strengths, family resources and connections and risk factors. This information allows for an accurate determination about accepting the report and about the immediacy of response. If accepted as a valid allegation, it will allow the district supervisor and social worker to plan the safety intervention in a way that will minimize risk to the child and to the social worker.

If in the social worker's judgment, the reporter's information indicates that a child may be in immediate jeopardy, the social worker will immediately bring the report to the supervisor's attention.


The social worker will enter all reports of abuse and neglect in FSDNet. Documentation of concerns about the same incident from different reporters may be appended and screened for acceptance for up to 30 days.

### Allegations of Child Abuse or Neglect by Department Employees

If a referral source alleges child abuse or neglect by a department employee, the CIU will immediately refer the matter to the Child Protection Director or Policy and Operations Manager. If determined a valid allegation under Chapter 49, the Secretary of Agency of Human Services will determine the appropriate unit to conduct the safety intervention.

### Screening Reports of Child Maltreatment

In child protective services, we are challenged to promote the safety of children while respecting family integrity and the diversity of family values and lifestyles. The division does not investigate concerns about the child's general condition.

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For example, concerns about a marked change in the child's behavior, the presence of domestic violence in the home, or about the heavy drinking by parents/caretakers would not in and of themselves constitute a report. There must be a valid allegation that there is harm or risk of harm to the child caused by abuse or neglect as defined by Chapter 49.

The division shall determine the validity of reports promptly as soon as sufficient information is available to make that determination. A report shall be considered valid when the division receives information that alleges that:

1. The person responsible for the child's welfare has harmed or is harming the child by :
  - a. physical injury;
  - b. neglect;
  - c. medical neglect;
  - d. emotional maltreatment; and/or.
  - e. abandonment of the child.
2. The person responsible for the child's welfare has, by acts or omissions, placed the child at significant risk of serious physical harm.
3. Any person who, by acts or omissions, placed the child at significant risk of sexual abuse.
4. Any person has sexually abused a child.


A CIU/ESP supervisor will make the initial determination about the validity of the allegation. Decisions are based on the information provided, regardless of who provided the information and regardless of whether or not their identity is known.

A CIU/ESP supervisor will be available to screen referrals in a timely manner to determine whether or not they will be accepted as reports. If a report indicates that a child is in imminent danger, it will be screened immediately unless more information is needed. If more information is needed, the supervisor will note as an append why the report was not formally screened. All other reports will be screened by midnight on the day they are received.

If the allegation is not determined valid by the first screener, a second person<sup>1</sup> will screen the report within 48 hours of the first screen. If the second screener determines the allegation is valid, the case will be assigned and a child safety intervention commenced

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<sup>1</sup> A Senior Social worker, Supervisor or District Director. The Child Protection Director or the Policy and Operations Manager may also determine that a report is a valid allegation.

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within 72 hours of the receipt of the report, provided there was not new information that caused the report to be accepted.

If the allegation was determined valid on the basis of new information received, then the safety intervention should commence within 72 hours of the receipt of that information.

#### Acceptance Criteria

The division conducts two types of child safety interventions: investigations and assessments. The division will conduct a child safety intervention when:

- CHINS A - A report of child abuse or neglect has been accepted as a valid allegation.
- CHINS B - A pattern of concerns or a single incident does not meet criteria for acceptance under 33 VSA Chapter 49, but the child may be without proper parental care or subsistence, medical, or other care necessary for his or her well-being.
- CHINS B - Allegations that a parent/caretaker has neglected a child's education. 16 VSA §1121 requires that a person having the control of a child between the ages of six and 16 years shall cause the child to attend a public school, an approved or recognized independent school or a home study program for the full number of days for which that school is held, unless the child:
  - is mentally or physically unable to attend; or
  - has completed the tenth grade; or
  - is excused by the superintendent or a majority of the school directors as provided in this chapter or
  - is enrolled in and attending a postsecondary school which is approved or accredited in Vermont or another state.
- CHINS B - A woman is pregnant and either parent or caretaker has a substantial history with DCF. An assessment may begin approximately one month before the due date or sooner if medical findings indicate that the mother may deliver early.
- CHINS B - A physician certifies or the mother admits to use of illegal substances or non-prescribed prescription medication during the last trimester of her pregnancy.

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- CHINS B - An newborn has a positive toxicology screen for illegal substances or prescription medication not prescribed to the patient or administered by a physician
- CHINS B - A newborn has been deemed by a medical professional to have Neonatal Abstinence Syndrome through NAS scoring as the result of maternal use of illegal substances or non-prescribed prescription medication.
- CHINS B – A newborn has been deemed by a medical professional to have Fetal Alcohol Spectrum Disorder
- CHINS B - When there is an allegation that there is likely to be a serious threat to a child's health or safety, or due to the mother's substance abuse during pregnancy, intervention before a child's birth may assist the family to remediate the issues and avoid the need for DCF custody after the birth. Therefore, such assessments may begin approximately one month before the due date or sooner if medical findings indicate that the mother may deliver early.


**Note:** Please see Policy #60 Youth Assessments which includes children ages 6-16 who are habitually truant (youth refusing to attend school CHINS C).

#### Gathering More Information

At times, the information given by the reporter cannot be determined a valid allegation, but the supervisor responsible for screening believes that more relevant information may be available. In that case, the supervisor screening the report may assign an intake social worker to gather that information. In the case of second-hand reports, the intake social worker may attempt to contact the original informant for further information.

Attempts to gather more information will occur when a report references prior child protection involvement with the family in Vermont or any other jurisdiction. Examples of involvement may include past investigations or assessments, open protective services cases or custody episodes.

Information gathered should be appended to the intake report to inform decision-making. If a reporter (including a reporter who has made a prior report about the same family) calls to report a separate incident of abuse or neglect or is independently reporting concerns about a child, this information will be entered as a separate report in FSDNet to ensure that the information receives a first and second review per policy.

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The purpose of gathering more information is to determine whether the allegations should be considered valid. These activities do not represent the commencement of an safety intervention. In those instances in which more information needs to be gathered, the supervisor must establish and document clear tasks and deadlines to be met<sup>2</sup>.

The supervisor will review the additional information that has been gathered every 7 days until sufficient information has been gathered to make an acceptance decision. After each review the supervisor will append the intake to reflect that he or she has reviewed the information. Once accepted, the investigation must be commenced according to the assigned response priority.

Reports will be available for appending and/or accepting with more information for 30 days.

#### Determining Response Priority for Child Safety Interventions

Child safety interventions are assigned a response priority based on information available at the time of intake. Recommended response times are:

- Level 1: Requires heightened awareness for immediate response to ensure child safety, commence within 72 hours
- Level 2.1: Commence within 72 hours
- Level 2.2: Commence within 72 hours

If the response priority is a Level 1 and an immediate response is not taken the supervisor making the decision not to respond immediately will document the rationale as an append.

#### Entries into the SSMIS Supervisory Tracking Form


When a case is opened for investigation, the case type is designated as CI.  
When a case is opened for an assessment, the case type is designated as CA.  
When a case is opened for a CHINS B assessment, the case type as designated as CJ.

#### Allegations of Maltreatment of Children in Open Cases

From time to time, a social worker will receive new information that alleges that a child whose family is receiving ongoing services from the division has been abused or neglected.

<sup>2</sup> This can be done in either the rationale for non-acceptance or appended to the intake.



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When this occurs, the social worker will promptly notify the CIU. If accepted, the child safety intervention will be conducted by a social worker other than the assigned social worker in close coordination with the assigned social worker.

#### Criteria for Determining the Validity of an Allegation of Child Maltreatment

The report will be considered a valid allegation if the information in the report gives the supervisor reasonable cause to suspect that the child **may** be an abused or neglected child, which is defined as:

- “a child whose physical health, psychological growth and development or welfare is harmed or is at substantial risk of harm by the acts or omissions of his or her parent or other person responsible for the child's welfare. Also,
- a child who is sexually abused or at substantial risk of sexual abuse by any person” (33 V.S.A. §4912(2)(a).

It is not necessary for all of the components required for substantiation to be present in a report for that report to be considered a valid allegation.

The following sections provide more specific guidance about the acceptance of reports of certain types of child maltreatment.

#### Physical Abuse


In determining whether a report of physical abuse is a valid allegation, the division shall consider whether the report alleges that a person responsible for the child's welfare caused:

1. Death due to physical abuse;
2. permanent or temporary disfigurement by other than accidental means; or
3. impairment of any bodily organ or function by other than accidental means.

When the sole allegation is that the child has a mark caused by a person responsible for the child's welfare, but no other injury, the allegation shall not be considered valid unless there is also information to indicate that the mark has lasted for or appears likely to last for more than twenty-four hours.

#### Emotional Maltreatment

The division will consider an allegation of emotional maltreatment valid if the report alleges a pattern of malicious behavior which has resulted in the child's impaired psychological growth and development. The pattern does not have to be of the same behavior for the purpose of accepting the report for investigation.

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### Neglect

In determining whether a report of neglect is a valid allegation, the division shall consider whether the report alleges that a person responsible for the child's welfare failed or has failed, over time, to supply the child with adequate food, clothing, shelter, or health care, causing actual or substantial risk of negative consequences to the child's health.

### Sexual Abuse

In determining whether a report of sexual abuse is a valid allegation, the division shall consider whether:

1. The contact with the child was incestuous;
2. the alleged perpetrator was entrusted to care for the child by the authority of the law or the child is the perpetrator's child, grandchild, foster child, adopted child or stepchild ;
3. the child is being exploited, or prostitution is involved;
4. it appears that a significant difference in age, size or developmental level was used to victimize the child, or
5. it appears that force, threat, or coercion is used to victimize the child; or the victim did not have the ability or opportunity to consent.

Sexual abuse or sexual contact between a child age 16 or older and another person will not be accepted absent elements of threat, force, or coercion, or lack of opportunity or inability to consent unless:

1. The care of the child is entrusted to the alleged perpetrator by the authority of the law; or,
2. the child is the perpetrator's child, grandchild, foster child, adopted child or stepchild.


Sexual abuse or sexual contact between a child age 9 or under with a same-aged or younger child will not be accepted unless there are aggravating circumstances<sup>3</sup> or a 5 year age differential. Caretakers of the children involved should be encouraged to utilize local resources such as pediatricians, therapists, etc.

Should the division be informed about repeated incidents of such child-to-child sexual abuse and it appears a caretaker has failed to attend to the child's needs; the allegations

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<sup>3</sup> Including but not limited to the following: use of weapons, insertion of objects into anal or genital orifices, oral genital contact and intercourse.



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may be opened under medical neglect or risk of harm, or as a CHINS (B) Child Safety Assessment.

Sexual abuse or sexual contact with a child age 10 through age 15 and any person will be accepted if there is a 5 year developmental or chronological age differential (greater than 4 years, 364 days), or elements of threat, force, or coercion, or a lack of opportunity or inability to consent.

Any allegation of sexual abuse involving incest (Please see Policy 50 Child Abuse and Neglect Definitions) or prostitution, regardless of the child's age, will be considered a valid allegation.

The following table summarizes the criteria for determining a report of sexual abuse a valid allegation.

<b>Alleged Victim Age</b>	<b>Alleged Perpetrator Age 9 or Younger</b>	<b>Alleged Perpetrator Age 10 or Older</b>
9 or younger	<ul style="list-style-type: none"> <li>There is a 5 year developmental or chronological age differential; or</li> <li>Aggravating circumstances are alleged, including but not limited to, insertion of objects into anal or genital orifices and intercourse; or</li> <li>Prostitution or exploitation are alleged; or</li> <li>Contact was incestuous</li> </ul>	<ul style="list-style-type: none"> <li>The alleged perpetrator was entrusted to care for the child by authority of law; or</li> <li>The alleged victim is the alleged perpetrator's child, grandchild, foster child, adopted child or stepchild; or</li> <li>There is a 5 year developmental or chronological age differential; or</li> <li>The alleged perpetrator used force, threat or coercion to victimize the child and / or the victim did not have an opportunity to consent; or</li> <li>Prostitution or exploitation are alleged; or</li> <li>Contact was incestuous</li> </ul>
Age 10-15	<ul style="list-style-type: none"> <li>There is a 5 year developmental or chronological age differential; or</li> <li>The alleged perpetrator used force, threat or coercion to victimize the child and / or the victim did not have an opportunity to consent; or,</li> <li>Prostitution or exploitation are alleged; or</li> <li>Contact was incestuous</li> </ul>	<ul style="list-style-type: none"> <li>There is a 5 year developmental or chronological age differential; or</li> <li>The alleged perpetrator used force, threat or coercion to victimize the child and/or the victim did not have an opportunity to consent; or,</li> <li>Prostitution or exploitation are alleged; or,</li> <li>Contact was incestuous</li> </ul>

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<b>Alleged Victim Age</b>	<b>Alleged Perpetrator Age 9 or Younger</b>	<b>Alleged Perpetrator Age 10 or Older</b>
Age 16-17	<ul style="list-style-type: none"> <li>The alleged perpetrator is significantly developmentally more advanced than the alleged victim; or</li> <li>The alleged perpetrator used force, threat or coercion to victimize the youth and / or the victim did not have an opportunity to consent; or</li> <li>Prostitution or exploitation are alleged; or</li> <li>Contact was incestuous</li> </ul>	<ul style="list-style-type: none"> <li>The alleged perpetrator is significantly developmentally more advanced than the alleged victim</li> <li>The alleged perpetrator used force, threat or coercion to victimize the youth and / or the victim did not have an opportunity to consent; or</li> <li>Prostitution or exploitation are alleged; or</li> <li>Contact was incestuous; or</li> <li>The alleged perpetrator was entrusted to care for the child by authority of law; or</li> <li>The alleged victim is the alleged perpetrator's child, grandchild, foster child, adopted child or stepchild.</li> </ul>


### **Risk of Physical Harm**

In determining whether a report of risk of physical harm is a valid allegation, the division shall consider whether the report alleges:

- a) The parent or caretaker has committed a single, egregious act that has caused the child to be at significant risk of serious physical injury.

Examples egregious acts include, but are not limited to:

- DUI with children in the car with excessive speed or accident resulting;
  - Corporal punishment of child under 1 years of age no injury necessary; or
  - Production or pre production of methamphetamines in a home where children reside
- b) The parent or caretaker has failed to provide age-appropriate supervision for the child and as a result, the child is at significant risk of serious physical injury.
  - c) The parent is incapable, due to a mental or physical illness/condition or developmental disability, of providing age-appropriate supervision, and no other person is available to assist.
  - d) The reporter has observed or a professional reports that a parent or caretaker of a child under the age of six and has a current pattern of use of illegal substances or misuse of prescription drugs and the child lacks age-appropriate supervision as a result; or is regularly impaired by use of alcohol and the child lacks age-appropriate supervision as a result. A report will be accepted when the reporter has observed or a professional reports that a parent or caretaker has a current pattern of use of methamphetamine.

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- e) There is specific information provided that alleges the parent or caretaker allowed a child to be exposed to methamphetamine production.
- f) There are allegations that there is significant risk of serious physical harm to a child due to domestic violence in the home. In considering whether a child is at significant risk, the following issues should be considered:
  - Past history of substantiation(s) or conviction(s) or reported history of child maltreatment.
  - Criminal history of domestic-violence related crimes.
  - Proximity of the children to the domestic violence as well as the nature of the violence or crime; including when a child physically intervenes in a domestic assault or is forced to participate in a domestic assault.
  - Use of weapons or objects that could cause harm in the presence of children in the context of domestic violence. Issues related to who is the dominant aggressor and whether the person is acting in self defense will be taken into consideration as part of the case determination.
  - In the context of domestic violence, presence of direct threats (including verbal threats) of serious bodily injury or death to or regarding the child or other children of the family or in the household.

The division shall consider a report valid, regardless of the above issues, when:

- there is a death of a parent or caretaker as a result of domestic violence and the child was reported to have been in the home or on the property when the incident occurred, regardless of the child's exact location; and/or
- a gun is discharged inside a home when the child(ren) are also in the home regardless of where the child(ren) are physically in the home.

The division does not intervene in situations in which the sole concern is that parents or caretakers fail to:

- Install smoke detectors;
- Use car seats for young children;
- Use seatbelts for children;
- Ensure the use of bicycle or motorcycle helmets by children;
- Ensure the child receives recommended immunizations; or,

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- Ensure the child receives recommended newborn prophylaxis (Vitamin K, newborn hearing screen).
- The only allegation is that a child has witnessed or been exposed to domestic violence.

### **Risk of Sexual Abuse**

In determining whether a report of risk of sexual abuse is valid, the division shall consider whether the child has contact with a person with a past substantiation or conviction for sexual abuse and it appears that the child is at significant risk of sexual abuse.

### **Jurisdiction Issues**

The division shall respond to reports of child abuse or neglect when:

1. The alleged abuse or neglect occurred in Vermont, or
2. the alleged abuse or neglect occurred out of state and the child is a resident of or is present in Vermont.

When the division has determined that a report is a valid allegation and the child or the alleged perpetrator or both do not live in Vermont, the department may respond in one of the following ways, as most appropriate to the situation. The supervisor who determines that an allegation is valid may decide to:


1. Open an investigation;
2. Open an assessment; or,
3. Notify a child welfare system and/or law enforcement agency in another jurisdiction of the need to respond, including coordinating a joint response with the other jurisdiction when indicated.

Allegations that a resident of Vermont sexually abused a child will always be accepted for investigation.

### **Victims Who Are Now Eighteen Years and Older**

A referral alleging that an adult was abused or neglected as a child will not be considered a valid allegation of child abuse or neglect of that person.

However, if the alleged perpetrator of sexual abuse has current caretaker access to children, the alleged victim (and others if necessary) will be interviewed in order to better determine whether or not a report of risk of sexual abuse should be considered valid. (See previous section on risk of sexual abuse.)

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## Assignment to Investigation or Assessment Response

The division may conduct an investigation of any valid allegation. However, unless there is compelling reason for choosing the investigative track, an assessment is the preferred child safety intervention. In making the decision, the division shall consider the following factors when determining whether to respond with an investigation or an assessment response:


1. There is reason to believe that a child's safety will be jeopardized if parental permission can not be obtained to interview the child.
2. The nature and severity of the abuse and extent of a child's injury, if any.
3. The alleged perpetrator's prior history of child abuse or neglect.
4. The chronicity of the abuse.
5. To the extent known by the reporter, the alleged perpetrator's willingness and capability to accept responsibility for the conduct and engage in a plan of services.
6. Any strengths and formal and informal supports and/or resources that are available or exist within the family and community, including resources and supports for people with disabilities if relevant.

The supervisor who determines that an allegation is valid will determine if the case should be assigned for investigation or assessment

## Assignment of Cases

When there is an open ongoing case and the family moves to a residence in a different district, any new child safety intervention will be assigned to the district where the family currently resides, even if the case has not been transferred. This will ensure that the district in the closest proximity to the child gets the information to expedite an assessment of the child's safety. The districts will then determine if the open case should be transferred as directed in current policy.

When there is an open case in a district and child in custody reports abuse while placed out of district (excluding licensed or regulated facilities), the child safety investigation will be assigned to the district where the child's case originates.

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## Mandatory Investigation Track

The division's initial safety intervention shall be an investigation if it alleges substantial child endangerment, including allegations that:

1. A child has been sexually abused and the alleged perpetrator is over 10 years old.
2. A child is at risk of harm for sexual abuse by any adult.
3. The acts or omissions of a person responsible for a child's welfare resulted in child fatality.
4. A person responsible for a child's welfare:
  - a. abandoned the child;
  - b. maliciously punished the child;
  - c. physically abused a child under the age of 3, including shaking;
  - d. physically abused a child of any age who is non-verbal or non-ambulatory;
  - e. allowed a child to be exposed to methamphetamine production.

Valid allegations involving the presence of multiple injuries should be assigned as an investigation response unless there is information that suggests the injuries occurred as a result of a single incident that did not include the use of malicious punishment and is not otherwise outlined above as requiring investigation response.

Valid allegations of child abuse and neglect within licensed and regulated facilities will be accepted for investigation if the alleged perpetrator is over the age of 10. See Policy 54: Investigating Reports of Child Abuse or Neglect in Regulated Facilities.

For additional information, see Appendix 3, Track Assignment Guidance.


## Notification of Mandated Reporters

Centralized Intake shall inform mandated reporters:

- Whether the report was accepted as a valid allegation.

District offices shall inform mandated reporters:

- Whether an assessment was conducted and if so, whether a need for FS services was found.
- Whether an investigation was conducted and, if so, whether it resulted in substantiation.

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If it is in the child's best interest, non-mandated reporters may also be informed that the report was accepted (FS-259).

### Conflict Investigations

At times, the assignment of a child safety intervention to a particular district may be or appear to be a conflict of interest. If that is the case, the supervisor should contact the Child Protection Director or Policy and Operations Manager to discuss the appropriate assignment of the case to another district or the Special Investigations Unit (SIU).

The Child Protection Director or the Policy and Operations Manager may assign the SIU to conduct the child safety intervention. Requests will be prioritized as follows, when the alleged perpetrator is:


- A relative or close personal relation of a division employee
- law enforcement or court personnel
- a local human services provider or a service provider with a direct working relationship with the district.

Other requests will be considered on their merits, and as resources allow.

### Intake Social Worker Tasks

- Discusses the nature of the person's request.
- Provides information as needed to the reporter about the role of the agency and available community resources to respond to the needs of the child and family.
- If the referral alleges abuse or neglect, completes on-line report form immediately, and asks the reporter to follow up with a written report.
- Determines whether or not the reporter desires his or her name to remain confidential and explains that if the matter goes to court, confidentiality cannot be guaranteed.
- Informs reporter that supervisor will make the decision about whether or not the report will be accepted for a child safety intervention.
- Searches Central Registry and Master Index to determine whether or not the caretaker and alleged perpetrator, as well as other adults residing in the home, have prior substantiations or involvement with Family Services, and assesses whether or not this information is relevant to the screening decision.



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- Searches the Department of Corrections database.
- Immediately alerts supervisor if it appears that the level of risk to the child may require immediate action.

## Screening Supervisor's Tasks

- Reviews report information in the timeframes required by policy.
- Immediately notifies his or her supervisor of any allegation of child abuse or neglect by a department employee. Such allegations will be referred to the Child Protection Director or Policy and Operations Manager.
- If not done by intake social worker:
  - Searches Central Registry and Master Index to determine whether or not the caretaker and alleged perpetrator, as well as other adults residing in the home, have prior substantiations or involvement with Family Services, and assesses whether or not this information is relevant to the screening decision;
  - If necessary to support decision, searches Department of Corrections database.
- Determines whether or not the report will be accepted as a valid allegation, and if so, the response priority and track assignment.
- Ensures that mandated reporters are informed about whether or not their referral is accepted for child safety intervention.